



Letter To Editor

Incorporating reflective practice in to medical and healthcare curricula

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Dear Editor

Reflection is not a new concept, it has long been used as a tool for professional education in many parts of the world (Moon 1999) but it is not yet a recognized educational strategy in many medical and healthcare education curricula in Iran and elsewhere and it is to this I now turn.

On the one hand, despite the superfluity of research evidence on effectiveness of reflective learning in medical and healthcare education worldwide, enormous ongoing research papers on using evidence to enhance graduate outcomes, conducting annual medical education congresses in many parts of Iran and government and universities initiations to promote medical education development, few universities use reflective learning techniques in their curriculum to improve learning outcomes.

On the other hand, Iranian Ministry of Health and Medical Education has recently announced Transformation and Innovation Plan for Medical Sciences Education (TIPMSE) as a mandate for all state medical sciences universities to employ successful experiences and proven educational strategies to transform their educational activities.

Although TIPMSE seems to be a well- founded and carefully devised plan for innovation of medical education in Iran, reflective learning and teaching reflection in order to promote reflective practice is not even implicitly mentioned in the document. This does not seem to be an accidental negligence of an educational concept in a rather mandatory document. This shows that the concept of reflective learning actually does not exist in our educational mindset.

It could be argued that reflective learning has not yet been culturally accepted in Iranian educational institutes as an effective educational strategy. The concept of reflection has not been introduced to Iranian medical sciences educators. The literature in Farsi language seems to be poor and inadequate when it comes to the concept of reflection. There are few papers discussing reflective learning in Iranian educational system and fewer provide evidence that the researchers and educators deeply understand what reflection is and how it should be implemented in medical and healthcare education.

There appears to be a ground for assuming that Iranian medical and healthcare educators and policy makers need to get more familiar with the concept of reflection as an educational strategy if they want to transform educational

practices. TIPMSE emphasizes on the importance of concepts such as professionalism, entrepreneurship, ethics, innovation and critical thinking, to name but a few. These are the qualities of graduates that are not just skilful or competent but thoughtful, wise and contemplative, the attributes of reflective practitioners (Schon 1983). Therefore we need to think about introducing reflection to Iranian educational system in general and to medical sciences education in particular.

Although it is beyond the scope of this letter to offer a detail account of how reflection could be introduced and implemented in medical sciences curricula, I will give an account of the possible steps.

Firstly due to the lack of a deep understanding of the concept of reflection there is a need to form study groups of reflection in the universities using classic and current literature.

Secondly a curriculum planning and development committee needs to be created composed of interested and well informed teachers and formal policy makers to decide on the issues like identifying needs,organizing the content, identifying the learning outcomes, deciding the educational strategy and models of reflection, assessment methods and establishing appropriate environment.

Thirdly establishing a culture of reflection, educational research on reflection and dissemination of research finding must be considered in all of the universities and educational institutes.

Finally by the virtue of complexity of teaching and learning reflective practice in medical sciences education careful considerations is required in all decisions made in order to make sure that educational backlash does not occur.

To summarize reflective practice is a prominent educational strategy which has not gained appropriate attention. It is not too late but we are running out of time to implement reflective practice in our healthcare educational system.

References

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